



PUBLIC DOCUMENT/COPIES REQUEST

There is a \$20.00 NON-REFUNDABLE Administrative Fee for all document research.

This fee is due prior to research by staff.

Cost for copies of all documents on 8 ½ x 11 or 11 x 17 paper is \$0.15 per page.

Date: _____

Requestor's Name: _____
Last First

Requestor's Address: _____

City State ZIP

Requestor's Phone #: _____

Address to be researched: _____

Nature of Request:

Number of Documents Reproduced: _____ x 0.15 = \$ _____

Receipt No. for payment of Administrative Fee: _____

Received by: _____ Date: _____